

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 OF 295
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
New York Life Insurance Company Political Action Committee

A. Ms. Shauna L. Soper
 Full Name (Last, First, Middle Initial)
 Mailing Address 11855 Villa Creek Avenue
 City Baton Rouge State LA Zip Code 70810-7341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New York Life Insurance Company Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2012
Transaction ID : PR856676860
 Amount of Each Receipt this Period 41.67
 P/R Deduction (\$41.67 Monthly)

B. Mr. Thomas F. English
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 Hedge Brook Lane
 City Stamford State CT Zip Code 06903-2029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New York Life Insurance Company Occupation Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2012
Transaction ID : PR8636860
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$50.00 Bi-Weekly)

C. Mr. David R. Walsh
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 Vista Grande
 City Greenbrae State CA Zip Code 94904-1135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New York Life Insurance Company Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2012
Transaction ID : PR866860
 Amount of Each Receipt this Period 250.00
 P/R Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	391.67
TOTAL This Period (last page this line number only).....▶	